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REVIEW OF ACADEMY ACTIVITIES*

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The Annual Report of the Council of the Academy of Medicine of 1890 informed the Fellows that the Academy had been installed in its new, handsome, Renaissance building which was of the most modern fireproof construction and sufficient in size for the needs of the Academy for all time. Within twenty years, the books of the Library had completely filled the existing stack and had spread over into various Section rooms and hallways and became a matter of serious concern to the Library Committee. At a meeting of the Library Committee in January 1909, Dr. Haven Emerson offered a resolution that the Chairman urge the Council to consider the pressing needs of the library and as rapidly as possible provide additional space for books.

In the spring of 1910, upon the recommendation of the Council, the Academy voted to purchase 15 West 43 Street and 10 West 44 Street and the existing building was mortgaged for \$225,000. In the autumn the two new sites were acquired.

No satisfactory plan having been devised for extending the stack the Trustees later sold 10 West 44 Street. The Council was nearly ready to go ahead, with a plan utilizing No. 15 West 43 when prices materially increased at the outset of the war so the project was postponed.

The project was re-opened in 1921 when the Academy Extension Fund had increased to \$178,672.51. Dr. George

*Delivered at the Annual Meeting of the Academy, January 7, 1932.

David Stewart the President appointed Dr. D. Bryson Delavan Chairman of the Committee on Plan and Scope and Dr. L. Emmett Holt as Chairman of the Committee on Building and Finance.

In April 1921, it was voted that another effort be made to buy a larger plot of ground and to erect a new building. The Council had received considerable encouragement on learning that Mr. Henry S. Pritchett of the Carnegie Corporation had heard of the Academy's project and was very much interested in the need of housing the library in a modern fireproof building.

Dr. Delavan's Committee drew up a plan for the development of the Academy which was presented informally at a meeting called by the President in March 1921 and a number of the Fellows felt that the plans proposed were impractical, hopelessly expensive or a dream. The Committee, however, presented its full report to the Council in June 1921 which was finally adopted but was not published until it appeared in the Academy Bulletin in December 1927 in a review prepared by Dr. Delavan entitled, "Incidents in the Recent History of the New York Academy of Medicine." The report stated, "The time of building is not so important as is the formulation of a general plan, comprehensive, far reaching and adequate. We can well afford to postpone definite action for a short period in view of the importance of a wise decision."

The Committee on Building and Finance gave serious consideration to the question of site which was not a simple problem and no immediate action thereon was taken.

In 1922 the Carnegie Corporation voted a grant of a million dollars for a new Academy building with the restriction that it approve the site and the plans for the building.

Subsequently, the Rockefeller Foundation voted to grant \$1,250,000 in accordance with an agreement which provided that the Academy should carry on ten activities for a period of ten years and that during that time the

Foundation would pay to the Academy the interest on \$1,250,000 and if at the end of that time the Foundation was satisfied that the work was useful it would pay over the principal to the Academy. The condition was also made that the Academy provide a site.

The selection of the site was a very troublesome problem and an agreement was reached only when one of the Vice-Presidents secured a gift of \$50,000 in January 1923 contingent upon the Academy erecting its new building at the then most favored site, the south-east corner of Park Avenue and 60th Street. Dr. Nathan E. Brill objected strongly to the selection of this site on the ground that it was no larger than the 43rd Street site. As a result of his arguments, an additional lot was bought on 60th Street, making the plot 100 x 120. The cost of the land at 60th Street was \$754,000.

A new committee was appointed at a meeting of the Council in January 1923 to solicit funds for the purchase of the site and for new endowment. This committee consisted of Dr. Royal S. Haynes as Chairman, Drs. Niles, Wallace, van Beuren and La Fetra, with power to add to their number. Instructions were given to the Committee that they should raise \$250,000 by May 1st, 1923. Under the active leadership of Dr. Haynes, an extensive drive was maintained, the results of which were highly gratifying; 1313 Fellows gave or pledged \$206,161.64 and the officers and other Fellows also secured donations or pledges from their friends amounting to \$324,922.78, a total of \$531,084.42.

PLANS FOR THE BUILDING

During the winter of 1923, the Building Committee, under the Chairmanship of Dr. Arthur B. Duel, had been at work with the architects, Messrs. York & Sawyer, developing a plan for the new building that would have cost over \$2,300,000.

One of the stipulations in the agreement with the Rocke-

feller Foundation was that a Director of the Academy's activities be appointed and after conversations with the representatives of the Foundations, it was reported at the December 1923 meeting of the Board of Trustees of the Academy that the Rockefeller Foundation had voted sufficient money to inaugurate the work of the Bureau of Clinical Information and to pay the salaries of a Director and Librarian. With this knowledge in hand, the Director was appointed and began his services on January 2, 1924. At this same meeting of the Trustees, it was also reported that the Carnegie Corporation could not make a larger grant for the new building and the new Director was asked to study the plans and the entire project and to consider further what could be done.

The Trustees and Council were convinced at their March meeting that the site at 103rd Street should be purchased as it was known that it could be obtained for \$225,000 and that the 60th Street site could probably be sold for \$1,000,000. The site was so desirable that efforts were made to hold it for the Academy and at a special meeting of the Trustees held on April 16, 1924, it is noted in the minutes that "the Director reported on the general situation and stated that he had arranged to have this property held for the Academy."

As soon as it was learned that the 103rd Street site had been acquired, the architects, York & Sawyer, were instructed to prepare new plans for a less expensive building.

A continued study of the project was made by the Director, acting under the instructions of the Building Committee and in constant conference with the architects who finally produced a set of plans for a building which would cost \$1,550,000. After continued negotiations with Mr. F. P. Keppel of the Carnegie Corporation, the Corporation finally voted the Academy an additional grant of \$550,000 in the spring of 1924. The plans were then completed and construction undertaken in the summer of 1925, and the building was opened on November 16, 1926.

FINANCIAL

The 103rd Street site with the additional lot subsequently purchased cost \$242,000 so that there was a saving of \$512,000 in the cost of the final site and a very fortunate profit of \$246,000 on the 60th Street site, saving the Academy \$758,000.

With the expectation of constructing a new building, the Trustees had discussed from time to time the possible sale of the 43rd Street property as early as 1923, which was finally sold for \$745,000.

The land and building at 43rd Street represented an investment of \$224,000 and the proceeds of the sale of this property added over \$500,000 to the Academy's endowment fund. These very fortunate transactions made it possible for the Academy to undertake its new program in the new building without being harassed by the necessity of raising a very large additional endowment which would have been necessary to carry on the activities at 60th Street. The land and building at 60th Street called for a total expenditure of over three million dollars whereas the land and building at 103rd Street cost \$1,800,000. This reduced the annual fixed charge on land and building by approximately \$60,000 a year.

No formal annual budget was adopted by the Academy prior to 1924 but this was soon provided for, and since that time an annual budget has been voted by the Trustees at their December meeting. The requests for appropriations are made to the Director who reviews them with the head of each department, and a tentative budget is prepared by him and submitted to a Budget Committee of the Trustees, and then considered by it before being submitted to the Trustees for action. The expenditures of the Academy have been from \$150,000 to \$300,000 a year and the expenditure of this sum of money has made it necessary to provide control over expenses by the installation of a satisfactory system of bookkeeping and budgetary control.

It has seemed wise to the Trustees to determine each

year in what way the dues of the Fellows shall be utilized. They recognize the fact that the Fellows of the Academy are interested primarily in the Academy as an institution of their own, and that the Section and Stated Meetings and the Library are essential features which are of primary value and interest to the Fellows. Accordingly the dues of the Fellows, which amount to approximately \$70,000 a year, are appropriated for the maintenance of the building, the Stated and Section meetings, salary of the membership clerk, part of the salary of the Cashier, and the balance to the Library. This proper allocation of the members' dues means that the work of the Committee on Public Health Relations, the Committee on Medical Education and the salaries of the administrative staff are paid from the Rockefeller and other endowments, so that no additional burden falls upon the Fellows.

In 1924, the Academy had a limited membership of 1100 resident Fellows which number was gradually increased to 1700 by 1926. At that time, the Board of Trustees consisted of five elected Trustees, the President, the Secretary and the Treasurer; and the Council included in addition to the Trustees the three Vice-Presidents and the Chairmen of the Committee on Admission and the Committee on Library and the Corresponding Secretary. Although the Public Health Committee had been in existence for a number of years, and its Chairman was a Trustee, the Committee had no authorized representative on the Council nor did the newly created Committee on Medical Education. It seemed wise at that time to have the Academy's charter amended so as to provide a larger number of Trustees and legislation was subsequently enacted which authorized an increase of the number of Trustees up to fifteen and authorized the Academy by its Constitution to specify the actual number. There are now ten Trustees and in addition the President, Secretary and Treasurer ex-officio.

These changes in the charter and changes in the financial matters required many alterations in the Constitution and By-Laws of the Academy. In addition to these two

important changes, there have been several other modifications of considerable interest which provide the following: that dentists may, under certain circumstances, become Associate Fellows of the Academy; that physicians who are giving full time to laboratory, teaching or administrative work may, on account of their small salaries, be accepted as regular Fellows without payment of an admission fee and at reduced annual dues. Another important provision was authorized by the Academy which placed the complete direction of the Academy's activities and the control of its policies in the hands of the Council.

An important function of a committee is the searching of minds and the development of joint opinion. It seems perfectly clear that in this country at least and particularly in our own medical profession, an idea or opinion of one individual on a particular matter when put into effect by him meets with nothing but antagonism and criticism of autocratic method. That same idea or opinion when proposed to a regularly constituted committee, discussed by it, finally adopted and subsequently approved by the governing body and submitted to the membership, receives as a rule very general support. There has been developed in the Academy Fellowship a definite democracy and community of interest in that all new proposals have received careful consideration. One of these proposals, not as yet put into effect, is a new classification of members and will be discussed later.

In 1923, there existed the Council and Trustees, the Committee on Admission, the Committee on Library and the Committee on Public Health with a total membership of less than 40 persons. Since that time, there have been created as standing committees of the Academy, the Committee on Medical Education and the Nominating Committee and in addition, many standing committees of the Council such as the Committees on Professional Standards, on Honorary Fellowship, Academy Medal and numerous other committees appointed for special purposes which are not continuing committees. At the present time, the

various standing committees of the Academy and Council and sub-committees exact service each year of over 300 Fellows of the Academy. The service of these Fellows with the various interrelationships between the committees bring about what is so aptly described in French as a "movement of opinion" which tends to knit the Fellowship of the Academy more closely together at least in ideas, if not bringing them all together in actual contact. It has been noticed also that many Fellows not known to each other previously have by their contact on committees developed into steadfast friends and above all, the increased committee activity has developed into a deepening sense of loyalty and admiration for the organization itself. There is no one thing which exemplifies this to a greater degree than the most hearty and sympathetic spirit shown by many of the Fellows in the recent efforts of the Academy to complete a fund of \$800,000, most of which has been subscribed, however, by private individuals and foundations. The final balance of \$32,000 was subscribed between Thanksgiving and Christmas by Fellows of the Academy and their friends. No expression of appreciation could give greater satisfaction to the Director than this indication of enthusiasm and loyalty at this critical period of the world's history.

LIBRARY

The Committee on Plan and Scope developed a number of ideas for increasing the usefulness of the Library, which were enlarged and modified in the discussions with the Rockefeller Foundation and which were finally put into the agreement. The articles of the agreement specified that the Academy should employ a full time competent Librarian and inaugurate a bibliographic and photostat service, but none of the new Rockefeller funds were to be used for the purchase of journals or books. The Library budget for 1923 amounted to \$28,351.85.

A historical allusion should be made to the fact that prior to the consolidation of the activities of the Academy

under the direction of one individual, the Library, Public Health Committee and the governing body were practically three separate entities. For years, the Trustees insisted that the Library should be maintained on the income from general and special library funds which amounted at that time to about \$11,000. After the war, after many discussions between the Library Committee and the Trustees, the Trustees finally agreed to appropriate for the purposes of the Library a sum of money annually for the payment of the staff, while the income from restricted library funds could be utilized for library maintenance. The funds added by the Rockefeller grants made it possible to pay the salaries of the Librarian, the bibliographers, and photostat operator on that fund but the development of the Library was left to the general funds of the Academy. That the Library has not been neglected by the Trustees is shown from the following expenditures made for the Library during the last few years:

Library Expenditures—Round Figures

	<i>Salaries</i>	<i>Expenses</i>	<i>Total</i>
1926	\$25,900	\$22,800	\$48,700
1927	55,500	23,300	78,800
1928	57,300	31,400	88,700
1929	60,400	34,900	95,300
1930	58,700	37,200	95,900
1931	60,800	39,000	99,800

Bibliographic Department

There had been a number of individuals who regularly worked in the library and who prepared bibliographies and translations for Fellows and others at rates determined by agreement in each instance. In the development of the bibliographic service of the library some of these individuals were taken over by the Academy and additional ones employed. It seemed only proper that the Fellows of the Academy who contributed toward the support of the library should pay a reduced rate for this type of service

and those who were not should pay double that rate. This procedure has been carried out satisfactorily for eight years.

When a bibliography on a particular subject has been prepared, it has been placed on file in the library and is available for reference at any time. If a period of time has elapsed since it was prepared, the amount of labor necessary to bring it up to date is relatively small. The number of these bibliographies now on file in the Academy is 482 and includes such titles as convolutions and fissures of the brain; postgraduate medical education; prevalence of heart disease; hysterectomy; Jews: diseases and anthropology; prevention of nervous and mental disease; preventive medicine of ear, nose and throat; meningococcus bacteremia, etc.

Photostat

It was something of an innovation when the photostat machine was installed in the new building and some Fellows were skeptical as to its being sufficiently used. As time has gone on, its use has been constantly augmented and during this last year there have been several occasions when the operator has had to have assistance to keep up with the work on hand.

Growth of Library

The growth of the library has kept on apace and almost each succeeding year brings a larger increment of books and journals as well as many other important donations. This has been commented on each year in the Annual Reports and it will not be necessary to repeat here because every Fellow reads the Annual Report with great care from cover to cover.

Some notable things have happened to the library, in particular, the purchase of the Streeter Collection of classics and incunabula in 1928 for the sum of \$185,000. This important addition to our Library was made possible by the enthusiasm and hard work of the then

President, Dr. Samuel W. Lambert. This historical collection materially augmented the existing collection of the Academy in this field and although numerically the Academy may have fewer incunabula than the Surgeon General's Library or the Library of the College of Physicians in Philadelphia, the mere presence of this collection has added enormously to the interest of a large number of the Fellows of the Academy in the subject of historical medicine.

ATTENDANCE IN THE LIBRARY

Nov. 25th to Dec. 27th, 1931, inclusive:

Doctors, New York City	2081
Doctors, outside New York City	202
Medical students	451
Non-Medical students	213
Workers in other sciences than medicine.....	301
Law workers	14
Secretaries	146
Others	467

3875

MEDICAL EDUCATION

In 1912, a group of physicians in New York City formed themselves into a society for the advancement of clinical study. This society maintained an office in the Academy and sent out a daily bulletin of surgical clinics and also published a booklet of fixed clinics. During the war it published a notice of medical clinics.

After the war in 1919, another group of physicians, most of whom were Fellows of the Academy, became deeply interested in the subject of postgraduate medical instruction and organized themselves under the name of the New York Association for Medical Education. This group secured a grant from the Carnegie Corporation, employed an executive officer, who made a study of the various opportunities available for graduate study in New York City and published a list of the various courses available. The Association also prepared an outline of the requirements for the training of specialists.

Conferences were held with representatives of these two organizations and with the coöperation of the late Dr. Charles N. Dowd who was President of the Society for the Advancement of Clinical Study in New York, and Dr. Wendell C. Phillips, who was Chairman of the New York Association for Medical Education, which resulted in each Association being dissolved and a number of the members of each society were appointed by the President of the Academy as a Committee on Medical Education with Dr. Charles N. Dowd as Chairman.

The unexpended balance of the grant from the Carnegie Corporation was transferred to the Academy and additional funds were secured from the Rockefeller Foundation at the end of the year and the work has been carried on continuously since that time.

There has been a considerable amount of routine activity carried on by the Bureau of Clinical Information which continues the publication of the surgical bulletin, the list of fixed clinics, and renders a still more important service by personally interviewing visiting physicians from all parts of the world as well as physicians of New York City. The visiting physicians are given cards of introduction to various professors and chiefs of staff of the different hospitals and in special cases, personal interviews are arranged so that each visitor may receive the greatest benefit possible from his usually brief stay in the city.

In addition to this, a number of physicians from the city and from various states in the union consult the Bureau for advice as to opportunities for foreign study. A number of the members of the Committee on Education are well informed of these opportunities by personal contact in Europe and many of them have graciously given of their time to advise numbers of these physicians as to the proper course to pursue.

Opportunities for internships and residencies have been compiled by the Bureau and a list of all of those avail-

able is maintained so that inquiries in regard to this type of opportunity may be readily answered.

Two notable contributions toward the progress of medical education have been made by members of the Committee. In 1928, Dr. Ludwig Kast described to the Committee an intensive, brief method of graduate study which was carried out in Berlin which was very largely attended and which appeared to serve a very useful purpose. He suggested to the Committee the possibility of the Academy organizing a series of clinics, lectures and exhibits annually for a period of two weeks. A beginning was made and such a fortnight was held during October 1928. This proved so successful that it has been continued to date and has created a wide interest. It has attracted an increasing number of physicians although largely from the metropolitan area but also from different states of the union. It has served a valuable educational purpose. The fortnight cannot be looked upon as a wholly sound educational procedure, but it does add to the interest of the visiting physicians and in many instances has stimulated them to pursue more actively their laboratory and clinical studies in the field of medicine presented. The organization of the fortnight has required a great deal of time, effort and brains and the Academy owes a great debt to the chairmen of the successive fortnight committees, Drs. Ludwig Kast, Harlow Brooks, and Emanuel Libman and also to Dr. Louis Gross who for three years has so successfully arranged the exhibits.

The organization of a Board of postgraduate studies representing 34 different hospitals in New York City, with Dr. Carl Eggers, Chairman, will bring about ultimately many sweeping changes in opportunities for study in New York City. Dr. Eggers has talked in season and out of season of the necessity of providing residencies with fellowships in various hospitals for training in the various fields of medicine so that there might be some real extension of the present apprentice system of acquiring com-

petency in internal medicine, surgery, and the various specialties.

This idea led also to its corollary, namely, the importance of preparing men for general practice. A large amount of time and thought has been given to the continued training of the physician and the committee has recognized that as soon as the physician is graduated from medical school his graduate study begins. It appears that in many hospitals, even those connected with medical schools, the organization of the residencies and intern staff is made primarily for the benefit of the hospital and the visiting staff and with relatively little regard for the preparation of the intern for either general or special practice.

While these plans and discussions of the Committee on Medical Education have been going forward, some of the Fellows of the Academy have taken an active interest in promoting still further the plans for graduate study under University auspices. Efforts along this line have finally brought about an affiliation of the New York Post-Graduate Medical School with Columbia University and the appointment of a joint board of graduate studies representing the Post-Graduate Medical School and the College of Physicians and Surgeons and the University itself. The plans for graduate study under the auspices of this joint board are in complete accord with the plans laid down by the Committee on Education. It would appear, therefore, that the clinicians interested in graduate study since 1912 have by indirect and useful methods brought about the recognition of graduate medical study as a definite and indispensable part of University organization.

Continued Medical Education

It is evident to all of us that the education of the competent physician is never finished. Although by law the young graduate is entitled to practice medicine as soon as he receives his license, yet we know that he is not fit until

he has had an apprenticeship as an intern. He is then better qualified but still lacks in experience, and he needs further information which can be acquired in journals and textbooks, and if he desires to become a specialist he needs a special type of instruction and training.

It is of primary interest to the Fellows of the Academy that the institution itself should be alive to the vast problem which presents itself in this field of continued education. The Academy of Medicine is not and cannot become a graduate school of medicine but it should become more and more the center of information and the promoter of activities for affording opportunities to physicians for their continued education. This was pointed out very forcibly by our President, Dr. Hartwell, in an address given last year.

PUBLIC HEALTH

The Public Health, Hospitals and Budget Committee was organized in 1911 shortly after a study had been made of the report of Mayor McLellan's Hospital Commission and was primarily for the purpose of studying and suggesting changes in the budgets of the Department of Health and the hospitals of the city which were then under the Bellevue and Allied Hospitals and the Department of Charities.

Prior to the organization of the Committee there had been a Section on Public Health in which a small number of the Fellows of the Academy were intensely interested. The Section on Public Health was then abolished and the Fellows interested in that particular type of work were largely chosen to form the new committee. Several years later, the name of the Committee was changed to the Committee on Public Health and a few years ago to the Committee on Public Health Relations.

It would be impossible to read a list of the subjects considered by this Committee over a very wide field within the limits of the entire evening. Its activities have been

most varied and interesting. In addition to the routine work of studying the administrative methods and budgetary proposals of the city's health and hospital activities, it has made a number of intensive studies which have led to unusual results. A study of child welfare work in the city was made and subsequently published which gave a great stimulus to the operation of the various agencies in the city engaged in this type of activity. An intensive study of hospitals and dispensaries produced two notable results—one, the organization of the Hospital Information Bureau under the United Hospital Fund which was for a time carried on in the offices of the Academy and under the direction of the Public Health Committee; second, the creation of the Dispensary Development Committee which made a five year intensive study of the dispensary situation in New York. After its labors were concluded, it turned over to the New York Tuberculosis and Health Association the organization known as the Association of Out Patient Clinics which endeavors through representatives of each of the dispensaries to see that proper standards of dispensary care are maintained. Another product of the Dispensary Development Committee was the creation of a better record system in a number of the dispensaries and hospitals and the creation of the Cornell pay clinic. The policy adopted by the Council in authorizing the Chairman of the Public Health Committee to appoint on sub-committees of the Public Health Committee any Fellow of the Academy has made it possible for the Committee to secure the advice and counsel of many men of many minds. It is a remarkable fact that the Academy of Medicine of France is the official advisory body of the French Government on matters of hygiene and public health. It is also a matter of personal knowledge that most of the important advice given by the Academy of Medicine of France to the Government is usually tucked carefully away in a pigeon hole and no action taken. On the other hand, our own Public Health Committee has no official standing in the City of New York, but its advice is fre-

quently sought and taken by the Health Department and the Hospital Department of the City.

The Academy has had no permanent legislative committee, but legislative matters are often considered by the Committee on Public Health Relations. One of its earliest legislative efforts was to bring about the consolidation of quarantine stations under the United States Public Health Service and the transfer of the New York State quarantine station to the Federal Government. Dr. Abraham Jacobi, our late revered Fellow, was the prime mover in bringing about this important administrative change.

During the first dozen years of the Committee's life, it was treated more or less as a stepchild by the Academy and its members were forced to seek funds for its support, although the Academy was willing to give it house room. The Academy was not able to appropriate any money for its maintenance until after the Rockefeller agreement went into effect. Much time and successful effort was devoted by Dr. Charles L. Dana and Dr. James Alexander Miller to the development of the work of the Committee and to securing funds. For many years, Mrs. E. H. Harriman has been an interested sponsor of the work and donations made by her annually have made the work of this Committee possible.

It is interesting to note that in the early days of the Committee a large number of the active workers were in their early thirties. Today, it seems hardly possible for anyone to break into the high society of this Committee unless he has attained the youthful age of at least fifty-five.

PUBLICITY

In the early winter of 1925, Dr. Dana placed the suggestion before the Council that the Academy organize a publicity bureau to give information to the press. This somewhat startled some of the sedate members of the Council. They responded nobly, however, and forwarded a rather lame resolution to a Stated Meeting of the Academy, at which meeting the late Dr. Walter B. James

spoke against the resolution and it was very promptly decided in the negative.

Although he did not say so then, the new Director was intensely interested in Dr. Dana's proposal and was extremely eager to have it put into effect, although at that time he was opposed to it, for he recognized that he was not competent to run such a service himself, nor were there funds available then to employ an assistant for that purpose.

It was not until 1929 that the Press Relations Bureau was organized jointly with the County Medical Society for the purpose of maintaining relations with the press. Publicity has served and will continue to serve many useful purposes. It must be evident to any Fellow that he cannot attend all of the meetings held at the Academy nor can he attend even the rarer important meetings which have a highly educational value. As a matter of fact, there have been a number of occasions when a great many more than a thousand physicians have attempted to gain entrance to Hosack Hall. The publication of an abstract of a paper read at the Academy in the morning newspapers is frequently read by interested physicians and also by physicians who subscribe only to the journal of the American Medical Association and one sometimes sees in such a physician's office fifty or sixty of the latest copies piled high on a desk unopened, unhonored and unread.

There is also an advantage in informing the readers of the press that there is an institution, known as the New York Academy of Medicine, and that it maintains a centre from which medical news may be distributed.

The Bureau, however, serves a far more important purpose than this. Under the leadership of Dr. Orrin S. Wightman, a number of dinner conferences have been held for three years with representatives of the press and many differences between the medical profession and the fourth estate have been ironed out. There is now a centre of information to which representatives of the press come almost daily for advice on many items of medical news and

the influence of the Bureau has so grown in the short space of two and a half years that many new "cures" which are about to be heralded upon an unsuspecting public through the medium of the press have been buried in the morgue of the newspaper.

It is also astonishing to see how readily the National Better Business Bureau, the broadcasting companies and the large advertising agencies seek the advice of the Bureau on many matters. The use of the radio for addresses on various medical and public health topics has been gradually brought under control although there is still room for improvement. An enormous amount of advertising copy is submitted by advertising agencies and the press and the Bureau's advice accepted to a very large degree. There has been a very definite change in the advertising policy of a number of our more dignified newspapers for which the Bureau must be given real credit.

As the Bureau represents both the County Medical Society and the Academy, it is also used as a medium of publicity for the County Society and loyally serves both institutions. The Committee which guides the activities of this Bureau represents equally the County Society and the Academy.

The Committee has felt that the public would be well served if more information was given it on medical matters and when an opportunity arose through the Associated Press to furnish articles to the press on medical matters, it was eagerly seized upon and for over two years Dr. Galdston has prepared a daily health article for the Associated Press which now has the largest circulation of any health column, as it is published in over three hundred newspapers. The question of how these articles could be signed created a little difficulty because the Associated Press insisted that they be signed by name and the County Society felt unwilling to approve of their being so signed. An agreement was finally reached that they should be signed, "Edited by Iago Galdston for the New York Academy of Medicine."

SURVEYS AND INVESTIGATIONS

Comment has already been made of the work of the Public Health Relations Committee in this field. There are two surveys now being carried on at the Academy under grants made by the Commonwealth Fund.

The National Committee on Nomenclature was organized by the Public Health Relations Committee and represents a large number of national associations, including among others the American Medical Association, the College of Surgeons and the Bureau of the Census. It aims to produce and secure the general adoption of a standard form of medical nomenclature.

A study of the causes of puerperal mortality is also being carried out under the direction of a special committee of the Committee on Public Health Relations. Every puerperal death in the city of greater New York will be critically reviewed during the years 1930, 1931 and 1932. This study requires a personal interview with the private or hospital physicians who have had a puerperal death.

When the report of this study is published, it will show conclusively the necessity of better standards of obstetrical care in hospital and private practice.

"What Medicine Can Do for Law," an illuminating address was delivered before the Academy at its Anniversary Meeting in 1928 by Chief Judge Benjamin Cardozo. Two years of discussion and conference between members of the Bar Association and the Academy have resulted in a program of study and its inauguration in the spring of 1931.

The study already demonstrates conclusively the need of changes in the methods of administration of the criminal law and in particular the necessity of requiring qualified psychiatrists to examine defendants accused of capital crimes and felonies. This investigation is being supported by a grant from the Carnegie Corporation.

Poliomyelitis

In the spring of 1928, a special committee was formed under the leadership of Dr. Simon Flexner to carry out a clinical study of the treatment of poliomyelitis in the preparalytic stage with convalescent serum. A limited number of patients were treated in 1928, 1929 and 1930 and a larger number (nearly 600) in 1931. The complete report of the results of this work has not yet been compiled. The total cost of this study to date has been over \$20,000, \$11,500 of which was contributed by an anonymous donor. The balance was obtained by the collection of fees from patients.

SECTIONS AND MEETINGS

The work of the Sections has continued largely as heretofore. An Advisory Committee of five elected by each Section has added further continuity to their work. These committees aid in the development of the Section programs and meet only as occasion demands.

The Chairmen of the Sections are constituted into a standing committee with one of the Vice-Presidents acting as Chairman. This Committee meets with the Program Committee to arrange for a coördinated program and to suggest programs for the Stated Meetings. The Program Committee under Dr. Samuel J. Kopetzky has been fertile in suggestions and contributes a great deal to the improved programs.

Stated Meetings continue, but only once monthly, the meetings of the Harvey Society replacing the second Stated Meeting of each month.

Prior to the moving of the Academy to its new building on One Hundred and Third Street, many Fellows feared a diminished attendance at Academy meetings. This has not been the case for the attendance has steadily increased at nearly every Section meeting until by 1930 the attendance at the Section meetings was more than double what it had been a decade previously, although there was a slight falling off during the year 1931.

The number of medical societies existing in Greater New York is legion. There always will be groups of physicians who organize themselves into special interest groups, or small associations for social purposes or for reasons of local convenience. These many societies serve a useful purpose in supplying a smaller or larger amount of information to their members while the latter have an opportunity to meet their colleagues and engage in friendly intercourse with them. Some of these societies have been outstanding in their efforts to promote scientific knowledge among their members.

The Harvey Society organized under the patronage of the Academy for the purpose of promoting the knowledge of and progress of scientific medicine has become affiliated with the Academy.

The Pathological Society organized prior to the Academy which never found a place in the former practitioner's viewpoint of the Academy has also become affiliated with the Academy and serves in effect as a Section on Pathology.

The New York Section of the Society for Experimental Biology and Medicine, the famous Meltzer Verein, has also affiliated itself with the Academy and is in effect a Section in this important field.

Similarly, the New York Roentgen Society has become affiliated and serves the purpose of a Section on X-ray.

The meetings of all these affiliated societies are open to physicians as are the Academy's meetings and Sections. Membership in these societies, however, remains in accordance with their own by-laws and Fellowship in the Academy gives the privilege of attending the meetings but does not confer the right of membership.

The affiliation of these scientific medical societies with the Academy has furnished a stimulus to the entire Fellowship to look to these societies for leadership in research and scientific investigations. Further, it has stimulated the desire of many laboratory investigators and teachers

with medical and non-medical training to become Fellows or Associate Fellows of the Academy. Many of these trained men and women have become Fellows and have strengthened the Fellowship and aided the Academy with their advice and counsel on many occasions. They serve on the Academy Medal Committee, the Honorary Fellowship Committee, the Gibbs Prize Committee and on various other committees.

PROFESSIONAL STANDARDS

In years gone by, charges of various kinds have been preferred against Fellows of the Academy. Such charges were usually investigated by the Council.

In 1926, charges were preferred against a Fellow which were investigated by a sub-committee of the Council.

Other cases had to be investigated subsequently and after the receipt of the report of the Committee on Activities in 1929, the Council appointed a standing committee on Professional Standards to whom all complaints were to be referred and investigated if necessary for report to the Council. It was clear to the Council that no final action could be taken by the Committee and also that before such action was taken the Fellow under charges should be given the opportunity to appear before the Council and state his own case. This course has been pursued. Most of the complaints that have been made were on the ground of unwarranted publicity and the majority of them were dismissed as the Fellow was usually the victim rather than the cause of the publicity.

Certain rules and regulations were adopted by the Council as well as by the County Society in regard to radio and publicity in general. These rules have been published and need no comment save that it is the opinion of the Council that the Fellows should uphold the honor of the profession as well as keep clear from unnecessary publicity.

No harsh actions have been taken and although several score of complaints have been investigated only four Fel-

lows have been reprimanded, three were allowed to resign, and one suspended for six months, for receiving payment for a signed testimonial.

HONORARY FELLOWSHIP

Prior to 1925, the Council from time to time recommended to the Fellowship the election of certain prominent physicians as Honorary Fellows. It seemed only appropriate at the time of moving into our new building in connection with the ceremonies that a number of new Honorary Fellows be elected.

Accordingly, a special committee was appointed by the Council for this purpose which has remained as a standing committee.

The Committee under the admirable leadership of its first chairman, Dr. Nellis B. Foster, gave some consideration to the type of individual who was on the then list of Honorary Fellows and three names were found on the list about whom no information could be obtained. After a considerable period of time it was learned who one of these individuals was, but in regard to the other two no information could be obtained. As they had been elected many decades before, it had to be assumed that they had departed this life.

It seemed important to the Committee to see that no individuals should be elected to Honorary Fellowship who did not have very definite claims to such a distinction. It was immediately agreed by the Committee that no Fellow of the Academy and no physician residing in Greater New York should be granted such an honor and in this opinion the Council concurred.

ACADEMY MEDAL

It was suggested by Dr. Samuel McCullagh that few medical societies conferred any medal upon their colleagues and he offered to donate a sum of money sufficient to grant a gold medal every year or so. In making a restricted

gift, Dr. McCullagh showed a very broad point of view in specifying in his deed of gift that the medal might be of gold or that two or more medals of silver or bronze might be given at the same time and that the award should be made for scientific or clinical work or for any particular service rendered by a physician in any field. What is still more unusual, he also specified that if in the future the Council felt that such an award was no longer of value, the money could be used for such purposes as the Trustees might determine.

LECTURESHIPS

The Carpenter Lecture was the only endowed lecture which the Academy had and several years ago negotiations were carried on with the Salmon Memorial Committee looking forward to the establishment of the Salmon Memorial in the Academy. It was interesting to note that several of the larger donors to the Salmon Fund emphasized the importance of the funds being established in an endowed institution which seemed likely to continue. It was originally proposed by the members of the Salmon Memorial Committee that the Academy should hold the funds and that the Council would agree to appoint certain individuals who were professors or members of the staffs of certain organizations to act as the Committee. A definite point of policy was made at that time which indicated that if the Academy had control of the fund, it must also have control of who was to spend it and in what manner. When the Committee which had charge of the fund-raising and shaping the use of the endowment learned that they would be the Committee of the Academy, an agreement was promptly reached and the members of the Salmon Memorial Committee became the members of the Salmon Memorial Committee of the Academy.

Other proposed endowments will be discussed a little later.

It is also gratifying to note that the Academy received

a small legacy from the late Dr. L. Duncan Bulkley for an annual lecture on the medical aspects of cancer.

The late Dr. Hermann Michael Biggs had always felt that the rank and file of doctors had little information of the workings of health departments or preventive medicine generally and after his death, Mrs. Biggs gave to the New York Tuberculosis and Health Association a sum of money to endow an annual lecture on some public health topic. It was an odd arrangement that the New York Tuberculosis and Health Association should hold the money and provide the speaker, the County Society furnish the audience and the Academy of Medicine loan the use of its hall. This was pointed out to the representatives of the New York Tuberculosis and Health Association and Mrs. Biggs agreed to have the fund turned over to the Academy which seemed entirely proper to all concerned. She subsequently made an additional donation bringing the endowment up to \$4,000.

GIFTS AND BEQUESTS

Several proposed gifts or bequests were refused by the Trustees and wisely so for the following reasons. A wealthy citizen proposed to leave to the Academy \$200,000 or more, the income of which was to be used by the making of grants to individuals engaged in research in medicine. It was to be stipulated, however, in the will that no grants should be made to Jews or any individual working in an institution which had a Jew as a member of its Board. This proposal was unanimously turned down by the Trustees.

Two proposed endowed lectureships have been refused because the terms of the bequest were entirely unsatisfactory to the Council. Another bequest of an endowed lectureship was refused because although the endowment was sufficient yet the choice of the lecturer and subject was left in the hands of another association. A special committee on Gifts and Bequests was appointed which functioned during the period of study of the Committee on Activities.

At that time, a letter was sent to all the Fellows pointing out the need of unrestricted funds. We should remember that special restricted funds add somewhat to maintenance cost and that arrangements should be made, as has been done in the case of the Salmon lectureship, that five per cent of the income be utilized for the general purposes of the institution.

COMMITTEE ON ADMISSION

Prior to 1926, the Committee on Admission consisted of five Fellows, each one elected to serve a term of five years. It was provided in the Constitution that any physician who was a graduate of five years standing of a recognized medical school was eligible for Fellowship. With this minimum standard, the Fellowship of the Academy was constantly increased prior to the above date and when the Academy moved to 103rd Street, it was still further increased to 1700 resident members, the number of Non-Resident and Associate Fellows being limited as previously to 400 each.

It was the custom to elect as members of the Committee Fellows who represented the different medical schools. There were two matters which deserved special attention. One was the need of a wider representation of specialists on the Committee and the Committee was increased first to nine and subsequently to twelve Fellows serving three years each instead of five. This larger representation has had a noticeable result in that practically every candidate is known to at least one member of the Committee. The Committee saw the necessity of having a personal acquaintance with the candidate and made a rule that no candidate would be considered unless he was personally known to a member of the Committee.

With the larger Committee it has also been possible, when letters have been insufficient or not particularly commendatory, for different members of the Committee to interview the sponsors of the candidates and their acquaint-

ances so as to ascertain definitely the medical and moral qualifications of a candidate.

The increasing number of applicants for admission made it necessary for the Committee to decide upon some standard of selection and it is generally agreed by the Committee that a candidate must have had an internship and hold a hospital, dispensary or laboratory position or have contributed to medical literature or have some other outstanding qualifications. This selective process has resulted in a considerable number of names of candidates being dropped automatically from the list without any adverse vote upon them and it is believed has improved the general quality of the Fellows elected during the last five years.

CLASSIFICATION OF FELLOWS AND SPECIALISTS

Several years ago, the Council noted that the majority of Fellows affiliated themselves with one or more Sections during the month of January of each year, some Fellows becoming members of as many as eight or ten Sections and a question arose as to whether or not a Fellow who was affiliated with a number of Sections felt that he was a specialist in each of the fields represented by those Sections.

At the same time, the Committee on Education was discussing the qualifications for specialists and this idea was further discussed by the Council and it was finally suggested that the Academy might have a new classification of its membership. Namely, that each new candidate for election (some time in the future) be elected as a "Member" of the Academy and that when he had acquired additional experience, the type and amount to be determined, he would be qualified as a "Fellow."

In accordance with the democratic spirit of the Academy, this question was discussed in the Committee on Admission and favorably reported on to the Council. It was also referred to the Committee on Medical Education and

favorably reported on and then referred to the officers of the Sections and the members of the Section Advisory Committees and there also received a favorable report. It was also approved in final form by the Council and by the Academy at the annual meeting in January 1931.

The Sections were then asked to prescribe the qualifications which should be met before a physician should be classified as a specialist in that particular field. This matter has been discussed by a number of the Sections and a few of them have come to an agreement but it will probably be many months more before a final decision can be made and given approval by the Council and also the Academy.

There was also included in this a suggestion that the Academy would recognize an individual who had met the required qualifications and been elected to "Fellowship" and that he would then be known as a specialist in that field.

There was no intent, however, to classify the existing Fellows of the Academy for they have already been elected as Fellows and such title cannot be taken from them as long as they remain in good standing in the Academy.

It is agreed by many physicians that some organization must take the lead in determining who are specialists and undoubtedly, in the course of time, this will lead to additional requirements being exacted by the State for the practice of a given specialty.

THE NEW ADDITION

The plans for the proposed building at 60th Street and Park Avenue called for a far larger building than our present one. The plan had the defect, however, of having a stack which, although larger than our present stack, could never be increased in size when once filled to capacity. This defect was obviated in the present building by having it built in three separate parts—the main building, the stack, and the auditorium wing. It was

obvious to the Council at the time that in this building as constructed there was no room for additional activities or for extending those already agreed upon.

The report of the Committee on Activities which was approved by the Academy at its annual meeting in January 1930, pointed out the need of additional facilities, but owing to what was then believed to be a "depression" the project was postponed. In the spring of 1930, however, on consultation with a number of our friends, it was agreed that it would be wise to go ahead with the project of raising \$750,000 or \$800,000, to be equally divided between endowment and for an addition to the building. The new addition will provide more Library space which is much needed, special rooms for the collection of historical books and incunabula, much needed office space for Academy committees and affiliated societies and several committee rooms. It will also provide some additional exhibit and storage space for exhibit material. This addition is to be built upon the vacant lot to the east of the Academy and over the auditorium, the style of the addition to be in entire keeping with the present building. The plan also visualizes the enlargement of the auditorium in the future.

RELATIONS WITH OTHER SOCIETIES

It has been a source of great satisfaction to feel that the Medical Society of the State of New York, the Medical Society of the County of New York, the First District Dental Society and other organizations make use of our building, and that we come in contact with them, their officers and staff frequently, and that we work in entire accord with these agencies. Nearly all of us here tonight are members of the County Society and we must recognize that from time to time various members of our own County Medical Society are critical of some of the activities or actions of the Academy, and we must also recognize that the reverse is true. It is difficult at times to delimit the activities of the Academy and the County Society so that

they do not overlap. Similarly it is not always feasible to form the organization of joint committees for joint action. The Academy, however, has shown a spirit of coöperation evidenced in many ways. The President of the Academy appoints annually a representative of each of the County Societies of Greater New York on the Public Health Relations Committee. These appointments are made from a list submitted by the President of each County Society.

The Press Relations Committee is a joint committee representing the Medical Society of the County of New York and the Academy, in equal numbers.

The Academy has also aided in the support of Medical Week in order to secure wider publicity for the Academy's meetings and for distributing information more widely in regard to opportunities for clinical and graduate study in New York City.

From time to time members of the County Society who are actively engaged in the administration of that Society have suggested schemes of coöperation for methods or projects which might be undertaken by the Academy. Serious consideration of these questions has frequently led to the conclusion that there are some functions which definitely belong to the County Society and which should not be undertaken by the Academy. It would be apparently simple for the Academy to undertake certain activities, for it is easier for an educational institution of the type of the Academy to obtain financial support, and with its larger staff and stronger organization, it is more readily suited to carry on certain activities. The temptation to undertake such steps, however, has been set aside when it was realized that the function was primarily one of the County Society, even though the Society could not undertake such an activity at that time.

EXPRESSION OF OPINION

The Academy has jealously guarded its expression of opinion on all matters, and does not desire to express its

opinion publicly except for special reasons. The By-Laws provide that no Section shall institute a procedure of public character without approval of the Council, nor may it issue any public statement without such approval. The By-Laws provide that the Public Health Relations Committee may express the opinion of the Academy on public health and hospital matters with the approval of three-fourths of the Committee and the President of the Academy. On all other matters no public expression of the Academy's opinion may be given without the approval of the Council. Although the Council has this authority, yet on a number of occasions it has not made use of it without submitting the question first to the Fellowship. One instance in which this action was taken was in regard to the proposed amendments to Section 7 of the Volstead Act, upon which the Council took no action until it had been voted by the Fellowship.

In the spring of 1931 the Academy published in its Bulletin a statement in regard to birth control which was prepared by the Public Health Relations Committee and unanimously approved by it and also by the Council. This was a modest statement which concerned the medical aspects of birth control. No publicity to this statement was authorized by the Academy, but unfortunately a garbled account of it appeared in only one paper, which brought about some criticism. It was interesting to note that this report was commented on in the weekly magazine "Time," which stated that the Academy was endeavoring to express the opinion of the medical profession. In June the House of Delegates of the American Medical Association passed a resolution, calling to the attention of the members of the American Medical Association that no resolutions of a public character should be presented or adopted by any medical society other than the component societies of the A. M. A. The Academy has no desire to express any opinion in behalf of the medical profession, but it does recognize that with a membership as intelligent and unusual as it has that it may express to the public its own

opinion on matters which relate to medical science in accordance with its Charter secured from the Legislature of the State of New York in 1851. No better example of the expression of opinion can be cited than that expressed by the President in regard to the desire of Drs. Coffey and Humber to exploit their treatment in the State of New York. The opinion expressed by our President was a collective one, obtained from Drs. Francis Carter Wood, James Ewing, Peyton Rous, James B. Murphy, Ira I. Kaplan, the Chairman of the Public Health Committee, the Commissioner of Health and the Commissioner of Hospitals and unanimously approved by the Council.

This long review of the activities of the Academy during the past eight years is the story of progress and with the alliteration of a political party, we may point with pardonable pride to the progress procured. Better organization, better methods and more intensive thought has brought about many changes. Change is not always progress and progress may not be change. Whatever improvement and progress has been made by the Academy is due primarily to brains and intelligently applied interest.

PRACTICAL APPLICATION OF APPROVED SUGGESTIONS

During these eight years, it has been the purpose of the Director to put into effect as rapidly as possible the suggestions laid down by the Committee on Plan and Scope in 1923. Nearly all of the suggestions made in that report have been put into effect. Other suggestions have been made from time to time by Fellows of the Academy and other physicians as well as laymen. It has at times been a long and tedious process to bring about a sufficiently broad discussion of a new suggestion so that the Fellowship at large will be neither shocked, disappointed nor dismayed at the inauguration of a new idea.

The management of an organization such as ours cannot be administered in the same manner as an industrial corporation. Decisions of any importance should not be made

by the Director alone but only after consultation with committees or with the officers of the Academy. For daily guidance, the Director has leaned heavily upon the advice and counsel of the four Presidents under whom he has served and desires to express here his very deep appreciation of the service rendered by Drs. George David Stewart, Samuel A. Brown, Samuel W. Lambert, and John A. Hartwell.

It must not be assumed, however, that there are not many matters of little import which were formerly decided upon by the Trustees or committees which can now, under the budgetary system, be handled by the Executive Officer. This relieves the Trustees and Council and committees of many trivial discussions which formerly took place and which encumbered the minutes of the Council and Trustees for many decades.

No small share of praise is well deserved by Dr. Bryson Delavan, who pointed out the needs of the Academy as early as 1910; Charles Mallory Williams and Haven Emerson, who urged the need of Academy extension; the able scientific leadership of the late Walter B. James during the war period; the broad vision and vivid personality of George David Stewart in the period immediately following the War carried forward the ideas of Dr. Delavan; the vigorous and incisive methods of L. Emmett Holt brought about plans for a new building. Nathan E. Brill, with wise judgment, emphasized the need of a larger site. Without Arthur B. Duel and his power of stimulating the imagination of Henry S. Pritchett, the funds for a new building would not have been secured from the Carnegie Corporation; the energy and persistence of Royal S. Haynes, with his associates on the committee for the Drive of 1923, made it possible for the Academy to secure the Rockefeller endowment; the late Charles N. Dowd, Wendell C. Phillips and Haven Emerson foresaw the need of a Committee on Medical Education and inaugurated movements which resulted in the formation of that Committee. To Ludwig Kast belongs the chief honor in the establish-

ment of the Graduate Fortnight, ably assisted by Drs. Harlow Brooks, Emanuel Libman and Louis Gross. Charles Loomis Dana and James Alexander Miller have been the leaders in our Public Health Relations Committee and for two decades have carried on this work with notable results. The stimulus to postgraduate study and the need of greater facilities for the training of specialists has been due to the Chairman of the Committee, Dr. Nellis B. Foster, and to the quiet persistence of Dr. Carl Eggers. Our relations with the press are cordial, and the notable improvements in the medical publicity in the press have been due primarily to Dr. Charles Loomis Dana and Dr. Orrin S. Wightman. There are several hundred other Fellows whose names I would like to mention who have brought suggestion, counsel and advice which have been most welcome. Criticism also has not been lacking and has been welcome and always will be.

WHAT OF THE FUTURE

A limited membership society should develop itself in accordance with the desires of its own members. It would appear that there are several tasks which are immediately ahead of us. Our own membership should be developed in such a way that we could recognize specialists and indicate the type of training and qualifications required for practicing a specialty. We should gradually fill up our non-resident and Associate memberships in which there are many vacancies. We should extend to physicians in the Army, Navy and Public Health Service a greater liberality to membership than we now do. A surgeon in one of these services, absent in the Phillipines, Panama or Europe for many years, has no inclination to pay dues during that prolonged period of absence.

We should continue and expand our influence in all matters pertaining to continued medical education and we should seriously consider whether or not we should solicit the coöperation of the medical schools, and from time to time indicate to them our opinion as to the qualifications

of their graduates, and what changes might be made in the medical school curriculum. At the present time this suggestion does not meet with great enthusiasm on the part of the Deans of our medical schools.

The Library is the greatest single instrument that we have for continued education. If funds were available it would be of interest to call to the attention of different groups of Fellows the importance of certain new books and articles. It would be of the greatest service if the Library could serve the Fellows in the same way that an effective departmental library in a medical school or laboratory serves its staff—by furnishing the members with abstracts of articles, or calling their attention to important new articles in the journals. This might be very expensive, but profitable.

The enormous amount of medical literature now available makes it difficult to persuade some physicians to read anything. An effort might be made to ascertain whether or not groups of physicians could be persuaded to read either by the publication and distribution of leaflets, or brief abstracts of articles, and by increasing the circulation of the Library.

There is a definite need of a reading room for physicians in the Bronx and in Queens, and the Kings County Medical Library needs further development. How far and in what way the Academy could coöperate in the development of reading rooms or libraries in other Boroughs must be given further consideration. A medical student should be taught the use of medical literature not only current, but historical, and the Academy might profitably coöperate with the medical school in stimulating this type of activity. Further, we will need an enlargement of the book stack within ten or fifteen years.

The report of the Committee on Activities indicated the further need of continued surveys and investigations in various fields. Several of these have been made by the Academy and there are many opportunities which need

to be explored. The rising mortality from appendicitis, the relations of the public hospital to the private hospital, the expansion of the use of convalescent homes, the increase in the operative death rate in certain conditions—are but a sample of the type of subjects which need investigation.

The employment of temporary staff members has its difficulties. Small groups of investigators are brought together to make a study and when finished, the staff is disbanded, and its members frequently left without work for considerable periods of time. This necessitates the paying of higher salaries for this type of work, and although these studies are financed as a rule by foundations, yet a better service would be performed if the studies could be made not only under the aegis of the Academy, but also with its own funds.

The Academy has one fund, the Gibbs Prize Fund, the income of which is devoted to medical research. Consideration should be given as to whether or not the Academy should solicit or accept funds for the promotion of laboratory research. Many physicians are deeply interested in various aspects of laboratory and clinical research and also, many of them are able to secure funds from their patients or friends to carry on a certain type of research. It is quite likely that some of this research is a matter of either personal interest on the part of the physicians or a duplication of other and better efforts. Whether it would be wise for the Academy to endeavor to coördinate research of this type and to aid physicians with grants is a matter which requires further study.

Museums of various types are of the greatest cultural and educational value. We recognize this in this city in the Museum of Natural History and in the Metropolitan Museum of Art. Suggestions have been made from time to time that the Academy create a museum of medical history or a museum of hygiene and public health. Seven years ago, before we moved into the present building the

Director felt it unwise to consider the creation of a medical museum in the new building primarily for the reason that the Academy was not yet ready to undertake such an enormous task. A medical museum would be of the greatest interest and should serve an educational and cultural purpose. It should have historical sections as well as sections relating to public health and hygiene. It should be a living organism for the better education of medical students, physicians and the public. It would require a building at least as large as the Academy and ultimately a budget fully as large. Museums, however, are usually the result of growth from small beginnings. Dr. Delavan will tell us that the Museum of Natural History began from a small collection of minerals housed in the Arsenal fifty or sixty years ago. The beginnings of a medical museum will be made when some younger Fellow of the Academy or some young physician develops a keen interest in it and has the energy and initiative sufficient to classify and collate the material which we now own, and develop the type of exhibit which we have had in the Graduate Fortnight and extend it, and promote year in and year out the need of such an institution. Such an institution will be developed in the City of New York. Whether it should be developed by the Academy or promoted by the Academy or by an entirely separate group, the future will decide.

STAFF

No organization or institution can function satisfactorily without a competent and loyal staff. In organizations of this type fancy salaries cannot be paid, not even during the "New Era." The rank and file of the clerical staff and of the building personnel can be paid only the current salaries and wages for similar positions in any field of activity.

Recognizing that the more permanent and loyal the staff the more satisfactory the work would be, steps were taken to aid the employees in several different ways.

The Academy as an educational institution became a member of the Teachers Insurance and Annuity Association which was founded by the Carnegie Corporation and most of the staff and some of the employees of the Academy have taken advantage of joining the Association by contributing five per cent of their salary, which is matched by an equal amount paid by the Academy, toward a future annuity upon retirement the amount of which will depend upon the length of service. If the length of service is thirty years the annuity will amount to half pay.

In the case of two individuals, the late Mr. John S. Brownne and Mrs. Laura E. Smith, the Trustees decided to retain their services in a consulting capacity at half pay for life.

Several of the Academy staff having died in service and it having been learned that their families were left in reduced circumstances, it was decided to take out a group insurance policy which entitles each of the staff and employees a policy of from \$500 to \$1,500 depending upon the character of the service of the individual. Payments on these policies are made entirely by the staff.

On several occasions, it was found that members of the staff received unsuitable medical or surgical care and an arrangement was made so that one competent hospital physician should act as the Academy's medical advisor. The arrangement provides that each and every member of the staff and building personnel may consult this physician once during the year for a complete physical examination. In the case of illness of a member of the staff, with the consent of the family physician, the Academy's doctor may call to learn the nature of the illness and its probable duration and also to see to it that the sick individual receives proper hospital care if it is indicated.

These measures have all been deeply appreciated by the staff.

Last year we celebrated the twentieth anniversary of the period of service of Dr. Corwin, whose wisdom in in-

vestigation, whose knowledge of hospital and public health matters, is as wide as that of anyone in New York. He has gradually acquired the confidence of the officials in this city and his continued efforts have been of the greatest service.

Dr. Reynolds' capacity for getting things done smoothly and without apparent effort and his modest and quiet manner have endeared him to many Fellows, and he has steadily brought forward the administrative work of the Clinical Bureau and the Committee on Medical Education to its present state of efficiency.

The advance made by the Library has been due to the intelligent energy of Dr. Malloch, who brought to us an intellectual endowment, broadly trained in clinical medicine, a natural spirit of research and a mind well steeped in the Osler tradition. It is not unnatural that every week a large amount of his time should be taken up by a continued stream of prominent visitors from all parts of the United States and Europe.

Dr. Galdston in the Press Relations Bureau has guided that work with peculiar skill and care. He recognizes constantly the danger of a situation, the possibilities of criticism which may arise at any moment from an unguarded statement which may leak into the press. To him much credit is due for the influence which the Academy now has in this city.

And what we would do without our own Felix I cannot say. Scarcely a Fellow enters the building whom he does not know. He can tell us in a moment all of the details of the lives of most of us. He knows where and how we live, and his never-failing courtesy and tact have endeared him to all of the Fellows over a period of nearly forty years.

No building can be maintained properly without efficient superintendence. Directly or indirectly every Fellow comes in contact with the building staff, and its sat-

isfactory maintenance is due to the efforts of our Superintendent, Mr. Maddocks. No physician in attendance at a meeting is satisfied unless the lights, the lantern and apparatus are all in working order and the staff prompt in their duties. No excuses are accepted if several of the staff happen to be sick or the movie operator fails to appear promptly.

All in all the work proceeds smoothly and should continue to do so. These heads of our different divisions could not do their work promptly or properly without competent assistance, and we are fortunate to have on our staff a number of intelligent women and men who work with loyalty, energy and efficiency, and to them much praise is due.

I cannot close Mr. President, without expressing to you my very deepest appreciation of the service you have rendered to the medical profession and to the City of New York not only during your period of incumbency as President of this great institution, but also as a member of the Public Health Relations Committee. As a member of that Committee and also as President, you have shown the greatest interest in the affairs of the Academy. You have been wise in your counsel. You have been a most excellent and welcome advisor to its Executive Officer, and far more than that, you have by your intellectual power, your impartial judgment and your moral courage, shown yourself to be not only a great leader but a great citizen of this city.
